

Approved by the UCSB Human Subjects Committee on: 10/07/2021

**CONSENT TO PARTICIPATE IN A RESEARCH STUDY**  
**RESIDENT'S CONSENT**  
**UNIVERSITY OF CALIFORNIA, SANTA BARBARA**

**Title of the Study:** The THRIVE study: Using technology to improve the quality of life of older adults in senior living communities and their adult children

**Lead Investigators:** Dr. Tamara Afifi, Department of Communication, UCSB, [tafifi@comm.ucsb.edu](mailto:tafifi@comm.ucsb.edu)  
Kyle Rand, CEO of Rendever, Boston, MA, [kyle@rendever.com](mailto:kyle@rendever.com)  
Dr. Nancy Collins, Psychological & Brain Sciences, UCSB, [ncollins@psych.ucsb.edu](mailto:ncollins@psych.ucsb.edu)

**Study sponsor:** National Institutes of Health (NIH), National Institute on Aging

**PURPOSE**

The purpose of the study is to examine how new technologies like virtual reality (VR) and Zoom (chatting through a video screen on a computer) can help you connect with your family and help you thrive. Our previous research has shown that technology can help improve emotional well-being, relationships with family, and quality of life. To participate in this study, you must be a resident at one of the senior living communities participating in this project. You must also have an adult child who can participate with you from a distance (from their own home).

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**PROCEDURES**

You will complete a survey and then use either VR or Zoom with your adult child once a week for four weeks. Your adult child will participate in the study with you from their own home. If you are using VR, we will put a small headset on you and you will see images and pictures. Your son or daughter will be using the technology with you from their own home and will see the same images and pictures. If you are using Zoom, you will be able to see and talk with your son or daughter on a computer screen. Each technology session will last approximately 30 minutes. We will also be asking you a few questions throughout the study, immediately after you use the technology, to determine how you feel. Finally, we will follow-up with you 1 month and 3 months after the study is over to see how you are doing. The entire study will take about six hours total. With your permission, we will also be audiotaping and videotaping the technology sessions. You can still participate in the study even if you decide that you do not want us to audio/videotape these sessions.

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**RISKS & BENEFITS**

There is some risk that you could feel mildly ill, dizzy, or sad while using the technology. If you are ever in distress, we can take the headset off or stop the Zoom session and get you a drink of water. If you are using VR, you can also watch the same images on an iPad instead. The use of the technology should be a fun and exciting experience. The technology we are using is being used in many senior communities around the country, with extremely positive responses from residents. If you have any concerns, you can also contact the Institutional Review Board at UCSB directly at (805) 893-3807. We will keep your information private. No one will know what you tell us, not even your child. Being in this study will help us provide other fun activities that residents can do with their adult children who might not be able to see their parent as often as they would like.

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**INVESTIGATOR DISCLOSURE OF FINANCIAL CONFLICT OF INTERESTS**

This study is funded by a grant from the National Institutes of Health (NIH), awarded to UCSB and Rendever. Kyle Rand, the CEO of Rendever, is a principal investigator on this project. He helped invent the VR platform being used in this study and might benefit financially if marketed.

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**CONFIDENTIALITY**

Your participation in this research is confidential. We will keep the information you tell us private. Only the researchers on this project (researchers at UCSB and senior personnel at Rendever) will have access to identifying

information on your surveys, and that information will be removed immediately after the study is completed. To allow us to match your surveys together, we will assign you a code number on each survey. The information resulting from your participation in this study will be retained indefinitely and may be shared with other researchers in the future for research purposes not detailed within this consent form. If data is shared with others, your name will be completely removed. We also have a separate consent form where you can provide consent for us to use your identifiable audio/videotaped data.

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### **COSTS/PAYMENT**

For participating in this study, you and your child will each receive \$150 at the end of the study.

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### **RIGHT TO REFUSE OR WITHDRAW**

Your participation is voluntary. You are free to decline to answer any specific questions. You may refuse to participate and still receive the care you would receive if you were not in the study. You may change your mind about being in the study and quit after the study has started. If you quit before the study has ended, you will receive \$20 per technology session and follow-up survey. If you participate until the end of the study but simply miss 1 session, you will receive the full amount (\$150). You also have the right to not be videotaped and audiotaped during the technology sessions.

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### **QUESTIONS**

If you have any questions about this research project or if you think you may have been injured as a result of your participation, please contact Dr. Tamara Afifi in the Department of Communication at UCSB ([tafifi@comm.ucsb.edu](mailto:tafifi@comm.ucsb.edu) or 805-679-1812). If you have any questions regarding your rights and participation as a research subject, please contact the Human Subjects Committee at (805) 893-3807 or [hsc@research.ucsb.edu](mailto:hsc@research.ucsb.edu). Or write to the University of California, Human Subjects Committee, Office of Research, Santa Barbara, CA 93106-2050

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### **CONSENT**

**PARTICIPATION IN RESEARCH IS VOLUNTARY. YOUR SIGNATURE BELOW WILL INDICATE THAT YOU HAVE DECIDED TO PARTICIPATE AS A RESEARCH SUBJECT IN THE STUDY DESCRIBED ABOVE. YOU WILL BE GIVEN A SIGNED AND DATED COPY OF THIS FORM TO KEEP.**

If you agree to take part in this research study and the information outlined above, please sign your name and indicate the date below.

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Participant Signature for Own Participation

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Researcher Obtaining Consent

\_\_\_\_\_  
Date

Is it okay to videotape and audiotape the technology sessions?    NO    YES

Would you like a copy of the research results?    NO    YES